State of Minnesota District Court County Judicial District: Court File Number: Case Type: Dissolution without Children In Re the Marriage of: Name of Petitioner **Affidavit of Personal Service** and Name of Respondent I, _______, state that I am at least 18 years of (Name of person who hand-delivered documents) age having been born on ______, and that on _____ I served the ____ (list all papers handed to the other party) _____ by handing a true and (Name of other party) correct copy of the documents to him/her at (street address, city, state) I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116. Signature County and State where signed City/State/Zip: Telephone:

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E-mail address: